

NOV 18 2005

PTO/SB/97 (08-00)

Approved for use through 10/31/2002. OMB 0551-0031

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Application Number: 10/072,396


Filing Date: 2/5/2002

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1. Fee Transmittal
2. Response to Office Action dated 11/15/2005
3. Information Disclosure Statement
4. PTO Form 1449

Total pages including cover sheet: 11
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NOV 18 2005

PTO/SB/17 (12-04)

Applicable for use through 07/31/2006. OMB 0001-0032

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Effective on 12/01/2004.
Pursuant to the Consolidated Appropriations Act, 2004 (P.L. 108-447).**FEE TRANSMITTAL**
For FY 2005☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 180.00**Complete If Known**

Application Number	10/072,396
Filing Date	2/5/2002
First Named Inventor	Richard St. Clair Bailey
Examiner Name	Michael Roswell
Art Unit	2173
Attorney Docket No.	MS1 1008U3

METHOD OF PAYMENT (check all that apply)
☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 12-0769 Deposit Account Name: Lee & Hayes, PLLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent: Fee (\$): 10, Small Entity Fee (\$): 25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent: Fee (\$): 200, Small Entity Fee (\$): 100

Multiple dependent claims: Fee (\$): 360, Small Entity Fee (\$): 180

Total Claims **Extra Claims** **Fee (\$)** **Fees Paid (\$)** **Multiple Dependent Claims** **Fee (\$)** **Fees Paid (\$)**

20 or HP = _____ x 50 = _____

HP = highest number of total claims paid for, if greater than 20

Indep. Claims **Extra Claims** **Fee (\$)** **Fees Paid (\$)**

3 or HP = _____ x 200 = _____

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets **Extra Sheets** **Number of each additional 50 or fraction thereof** **Fee (\$)** **Fees Paid (\$)**

100 = _____ / 50 = _____ (round up to a whole number) _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Information Disclosure Statement

180.00

SUBMITTED BY

Signature

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Date 11-18-05

Name (Print/Type) Mark C. Parrell

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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